

Adult Confirmation Sponsor Form



Candidate's Name

Sponsor's Name

- Please have your sponsor complete this form and sign where indicated.
- Have their parish representative complete the lower section.

Signature

This section must be completed by sponsor's parish representative:

The above-named person is a registered and practicing member of:

Parish Name: _____

City: _____ State: _____ Zip: _____

This person is Confirmed. Yes No

(Parish Seal)
where sponsor is a
registered parish member

Please return forms to:
Adult Confirmation
353 E. Norwich Street
Milwaukee, WI 53207